Global Commitment Register

March 30, 2016

GCR 15-010 FINAL

National Correct Coding Initiative Add-on Code Edits

Policy Summary:

The Department of Vermont Health Access (DVHA) is updating its use of add-on codes to follow National Correct Coding Initiative (NCCI) add-on code edits. An add-on code is a code that describes a service that, with one exception (see Medicare CR7501 for details), is always performed in conjunction with another primary service. A provider will no longer receive Medicaid payment for an add-on code unless the provider also bills for the primary service.

Effective Date:

April 1, 2016

Authority/Legal Basis:

These changes are being made pursuant to 42 CFR §430.12(c)(1)(ii) under the Medicaid State Plan, which can be found here: http://dvha.vermont.gov/administration/state-plan.

Population Affected:

Medicaid population.

Fiscal Impact:

	State Fiscal Year 2016	State Fiscal Year 2017
State	\$20,145	\$79,846
Federal	\$23,553	\$94,948
Total	\$43,699	\$174,794

Additional information:

Additional information regarding Add-on Code Edits can be found here: https://www.cms.gov/Medicare/Coding/NationalCorrectCodInitEd/Add-On-Code-Edits.html

